

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND

1 Date of Request:	11/19/02	2 Serial/Patent #	08934,367	
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT
<input type="checkbox"/> Filing				\$
<input type="checkbox"/> Amendment				\$
<input checked="" type="checkbox"/> Extension of Time		23	7/23/02	\$ 920.00
<input type="checkbox"/> Notice of Appeal/Appeal				\$
<input type="checkbox"/> Petition				\$
<input type="checkbox"/> Issue				\$
<input type="checkbox"/> Cert of Correction/Terminal Disc.				\$
<input type="checkbox"/> Maintenance				\$
<input type="checkbox"/> Assignment				\$
<input type="checkbox"/> Other				\$
		7 TOTAL AMOUNT OF REFUND	\$ 920.00	
		8 TO BE REFUNDED BY:		
10 REASON:		<input type="checkbox"/> Treasury Check <input checked="" type="checkbox"/> Overpayment <input type="checkbox"/> Duplicate Payment <input checked="" type="checkbox"/> No Fee Due (Explanation):		
		<input checked="" type="checkbox"/> Credit Deposit A/C #: 19-0733		
<p>Applicant submitted an extension of time beyond the maximum extendable period for reply.</p>				
11 REFUND REQUESTED BY:		TYPED/PRINTED NAME: Cliff Gony SIGNATURE: Cliff Gony OFFICE: Petitions		
		TITLE: Petitions Attorney PHONE: 305-0272		
THIS SPACE RESERVED FOR FINANCE USE ONLY:				
APPROVED:		DATE: 11/21/02		

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance
Refund Branch
Crystal Park One, Room 802B